

U.S. National Dragon Boat Racing Championships

Dragon boat racing originates in China as homage to the patriot-poet QuYuan who lived from 340-278 B.C. But dragon boat racing is no longer found only in China, and is in fact held in at least five continents and in more countries around the world than you can believe! The International Dragon Boat Federation governs the races, which utilize boats about 40 feet long, each with 20 paddlers, a steersman, and a drummer to control the pace.

The US National Dragon Boat Championships were held in Long Beach on the last weekend in July. The races were qualifiers for the World Championships in August 2009 in Prague, Czech Republic. Four U.S. teams – San Diego Dragon Boat Team, the West Coast Paddlers Association, Philadelphia Dragon Boat Team and Manayunk (from Philadelphia) – brought crews in several age divisions as well as women, men, and mixed crews to compete for the right to test themselves against the World's best in Prague, with the result that each team qualified several crews. The races at Long Beach were held in conjunction with the Long Beach Dragon Boat Festival, one of the largest dragon boat competitions in California, which included other festivities such as Chinese acrobats, traditional dance, music, martial arts, and traditional art demonstrations and performances.

Report and photos by Katie Slocomb



Can You Be Young Again?

Progesterone and Androgens

This article will continue our discussion on the rationale for supplementing different sex hormones to achieve greater physiological performance and overall well-being.

Progesterone is widely recognized as a primarily women's hormone that has protective effects for the uterus when on estrogen replacement therapies. More recent information has shown effective relief of menopausal symptoms and infertility treatment, with favorable effects on coronary arteries, endometrium and breast tissue. It also acts in the nervous system dealing with responses to pain, inflammation and stress. Topical progesterone seems to provide a better delivery in terms of metabolism, and contrary to some physician's beliefs, it does not share the same side effect profile as medroxyprogesterone (part of prempo).

Progesterone for men is a different story. Men also have progesterone but little is known about the effects of supplementation. I have heard it said that low dose progesterone may work as an aromatase inhibitor (blocking the production of estrogen and thereby increasing testosterone levels). This has not been shown anywhere that I could find and if so would have very weak activity as it has not been shown to lower estrogen levels. There has been discussion on the positive effects of progesterone on men's prostate but again there has been no definitive study done to show this effect.

The term androgens refer to a group of steroids that are active hormones as well as precursors to active hormones. They include DHEA, testosterone, androstenediol, dihydrotestosterone, and androstenodione. It is worthwhile to note here that any hormone that is not produced by the body is not hormone replacement therapy (HRT) and is hormone substitution therapy, substances like clenbuterol, dianabol, anadrol, methyltestosterone, premarin and many more are marketed as HRT but are not replacing anything found in the body. It is like putting olive oil in your car, it will run for a little while but eventually it is going to blow up. Basically, don't put anything into your body that has not been there for at least 40 years already.

Testosterone is the main defining characteristic between man and woman. It is crucial for the development of defining male characteristics; building muscle mass, body composition (metabolism of fatty deposits), increasing sex drive, deepening of the voice, hair growth, bone growth, etc. There are numerous studies showing the importance of normal range testosterone levels. The current opinions in endocrinology find that low testosterone in men predict development of type 2 diabetes, metabolic syndrome

(abnormal weight gain), and survival. As with any therapy there are some risks to consider, polycythemia (an overproduction of red blood cells), lipid profile (normally supplementation will have a positive effect on cholesterol- it is good to check), prostate disorders (is it time for the digital rectal? - never pleasant), acne, breast tenderness or enlargement (testosterone is the precursor to estrogen, if men are converting their testosterone we may add an aromatase inhibitor). It is important that we understand that testosterone replacement (or any hormone) is only done according to physicians orders and based on a documented deficiency with careful monitoring to ensure appropriate levels are obtained.

Androgen use in women is still not supported widely. Even after years of positive clinical studies there are still many

prevailing misconceptions about the use of "male" hormones in women. After menopause, androgen production decreases by as much as 50%. Androgens have been shown to be beneficial in women treating mastalgia (breast pain), hot flashes (especially when estrogen's alone have been ineffective), osteoporosis, increased muscle tone, and libido (significant increases in partner interest), initiation of sexual activity, and frequency of orgasm have been reported with low dose testosterone. The side effects of androgen therapy may include unwanted hair growth (at the site of application as well as facial hair), enlargement of the clitoris, deepened voice and acne. Androgen therapy should not be taken by women with a history of breast or uterine cancer

and careful consideration should be given before initiation of androgen therapy by anyone. Monitoring by a health care professional is a must. Androgen therapy in women has been under utilized most likely due to the lack of education of patients and the unavailability of a commercial form of bio-identical testosterone.

So, what does this mean for our women and men paddlers? First, women who may be peri- or post-menopausal or men that may be experiencing andropause must get tested to document a deficiency in this area then work with their health care team to find the proper amount of supplementation to meet their needs. Secondly, athletes that engage in replacement of endogenous hormones for anything other than a documented deficiency are taking an unfair advantage and risking severe side effects. Everyone wants to go faster and perform better, proper care taken to keep your body functioning at its peak involves many different aspects. Hormone replacement therapy is not a shortcut but may be a necessary piece of the puzzle of living at your best.

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